

Return of Allotment of Shares

Please complete in typescript, or

in bold black capitals. CHFP000	·				
Company Number	5430808				
Company name in full	GREEDLANDS NUTRITION LIMITED.				
Shares allotted (including bonus shares):					
	From To				
Date or period during which shares were allotted (If shares were allotted on one date	Day Month Year Day Month Year				
enter that date in the "from" box)	01 015 201015 017 015 201015				
Class of shares (ordinary or preference etc)	Onsider				
Number allotted	99				
Nominal value of each share	£ 1				
Amount (if any) paid or due on each share (including any share premium)	ch £ (.				
List the names and addresses of the allottees and the number of shares allotted to each overleaf					
If the allotted shares are fully or partly paid up otherwise than in cash please state:					
% that each share is to be treated as paid up	100%				
Consideration for which the shares were allotted (This information must be supported by the duly stamped contract or by the duly stamped particulars on Form 88(3) if the contract is not in writing)					



COMPANIES HOUSE Form revised January 2000

'ge 03/06/05

When you have completed and signed the form send it to the **Registrar of Companies at:**

Companies House, Crown Way, Cardiff CF14 3UZ

DX 33050 Cardiff

For companies registered in England and Wales

DX 235 Edinburgh

Companies House, 37 Castle Terrace, Edinburgh EH1 2EB For companies registered in Scotland

Names and addresses of the allottees (List joint share allotments consecutively)

Shareholder details	Shares and share class allotted.	
Name Theasance Horsings himitus	Class of shares allotted	Number allotted
Address havenster Rosse, Benekanns ST	Can	. 99
Paralleria	CASINALO	
UK Postcode P26 25		
Name	Class of shares allotted	Number allotted
Address	_	
		
UK Postcode		L
Name	Class of shares allotted	Number allotted
Address		
		L
UK Postcode		
Name	Class of shares allotted	Number allotted
Address		
		L
UK Postcode	L	
Name	Class of shares allotted	Number allotted
Address	_	
		L
UK Postcode		
Please enter the number of continuation sheets (if any) attached to this	s form	
Signed EMRISEU	pate13 /5/g	5_
A director / secretary / administrator / administrative receiver / receiver manager / rec		delete as appropriate

Please give the name, address, telephone number and, if available, a DX number and Exchange of the person Companies House should contact if there is any query.

WILDS CHARTERED ACCOUNTANTS		
LANCASTER HOU		
AADOLIFFE	Tel	
DX numbe(M26 2JW	DX exchange	